PTO/SB/06 (08-03)
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CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMALL	SMALL ENTITY		OTHER THAN SMALL ENTITY		
FOR NUMBER FILED BASIC FEE		ED NU	NUMBER EXTRA		FEE	_	RATE	FEE	7
(37 CFR 1.16(a)) TOTAL CLAIMS					OR	·	3	開	
(37 CFR 1.16(c))	33 minu	s 20 = ·		X 8_ =		OR	X \$ =		낂
INDEPENDENT CLAIMS (37 CFR 1.16(b))	6 minu	. 3		X . =		1	X 8 =	 	ST
MULTIPLE DEPENDENT C	1	 	OR	<u> </u>	 	Ⅎ⋗			
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* If the difference in column 1 is less than zero, enter *0* in column 2.				TOTAL		OR	TOTAL	L	JF
CLAIN	AS AS AMENDI	ED - PART II				•			≥
1000	Column 1)	(Column 2	2) (Calumn 3)	SMALL	ENTITY	OR	OTHER SMALL	R THAN ENTITY	AVAILABLE
RI	CLAIMS EMAINING AFTER IENDMENT	HIGHEST NUMBER PREVIOUSI PAID FOR	LY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	COPY
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Z independent • (37 CFR 1.16(b))	Minu	* 6	:2			OR	X \$=	110: -0	∤ 🛬
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))				TOTAL		OR	+\$=		_
2/28/06	olumn 1)	•		ADD'L FEE		OR	TOTAL ADD'L FEE	400.00	4
a	CLAIMS	(Column 2 HIGHEST	(Cotumn 3)		T			·	4
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(Co	lumn 1)	(Column 2)	(Cotumn 3)	1202133			A CIPEL		ł
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(37 CFR 1.16(cl)	Minus		=	X.5=		OR	X 6 =		1
Z Independent (27 CFR 1.16(x))	Minus	***	=	x s_ =		OR	X \$ =		1
FIRST PRESENTATION	+ 8=		OR	+; =					
If the entry in solution	l is loss than the co			TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
 If the entry in column 1 If the "Highest Number The "Highest Number I 	r Previously Paid Fo Previously Paid Fo	r' IN THIS SPACI I' IN THIS SPACI	E is less than 20, e	nter "20".			•		

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Three will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.